

SECRETARY OF STATE
ELECTIONS DIVISION
P.O. BOX 12066
AUSTIN, TEXAS 78711-2060

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USA_00019931

Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States

• Y

• Y

• Y

• Y 236297397

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completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

by form. Please pass it on to someone who could use it.

Permitted by the Office of the Secretary of State

The Official Use Only

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Are you 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of these questions, do not complete this form.

Have you ever voted in this county or at a federal office?

☒ Yes ☐ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Fold on line and seal before mailing

Last Name

Williams

First Name

Shirley

Middle Name (if any)

Former Name

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr. Apt 24, Houston, TX. 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP. If mail cannot be delivered to your residence address.

2519 Dashwood Dr. Apt 24, Houston, TX. 77024

Date of Birth: month, day, year

Gender (Optional)

☐ Male

☒ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number

☒ Check if you do not have a social security, driver's license, or personal identification number

Telephone Number, Include Area Code (Optional)

City and County of Former Residence in Texas

El Paso

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

03.04.07

Date

X Shirley Williams
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance Call
Office of the Secretary of State
Toll Free
Si necesita asistencia
llame gratis al
1-800-252-VOTE(8683)
www.sos.state.tx.us

NO POSTAGE
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UNITED STATES

BUSINESS REPLY MAIL
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POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

Houston TX 77253

Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification, you must provide the last four digits of your social security number. If you do not have either of these numbers, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una version en Español.

JA_005051

TX_00002292

USA_00019933

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.

• V



236297681

• Y

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Prescribed by the Office of the Secretary of State

For Official Use Only

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement

you a United States Citizen?

☒ Yes ☐ No

I you be 18 years of age on or are election day?

☒ Yes ☐ No

ou checked 'no' in response to either of these questions, do not complete this form.

Have you ever voted in this county for a federal office?

☐ Yes ☒ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Fold on line and seal before mailing.

Last Name <u>Williams</u>	First Name <u>Tamara</u>	Middle Name (if any) <u>Apt 24</u>	Former Name
Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) <u>2519 Dashwood Dr, Houston, TX 77024</u>			
Mailing Address: Street Address and Apartment Number, P.O. Box, City, State, and ZIP. If mail cannot be delivered to your residence address. <u>2519 Dashwood Dr Apt 24 Houston, TX 77024</u>			
Date of Birth: month, day, year	Gender (Optional) <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.	
TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number		I affirm that I - am a resident of this county; - have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and - have not been declared mentally incompetent by final judgment of a court of law.	
Check if you do not have a social security, driver's license, or personal identification number <input checked="" type="checkbox"/>		Date <u>03.01.07</u>	
Telephone Number, Include Area Code (Optional)		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. <u>X Tamara Williams</u>	
City and County of Former Residence in Texas <u>EL Paso</u>			

Office of the Secretary of State
 Toll Free
 Si necesita asistencia
 llame gratis al
 1-800-252-VOTE(8683)
 www.sos.state.tx.us

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POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
 COUNTY COURTHOUSE
 (CITY)

(ZIP CODE)

Houston, TX 77005

77253 572007-0000

Fill in line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification, then give the last four digits of your social security number. If you do not have either of these identification numbers, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

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 Favor de llamar sin cargo a la oficina del
 Secretario de Estado al 1-800-252-8683 para
 conseguir una version en Español.

JA_005053

TX_00002294

USA_00019935

Type: VOTER Record ID: 61389557 Imaging Dept. ID: 236588439

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of



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sion, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06E.p41

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17 Harris

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

Are you interested in serving as an election worker?

☒ Yes ☐ No

• Continue below to complete application.

Last Name First Name Middle Name (If any) Former Name

Williams Terry

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural RL) 2519 Dashwood Dr Apt 24, Houston TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP Code. If mail cannot be delivered to your residence address. P.O. Box 2365, Houston, TX 77023

Date of Birth: month, day, year

Gender (optional)

☒ Male ☐ FemaleTX Driver's License No. or Personal ID. No.
(Issued by the Department of Public Safety)☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I:

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Terry Williams Date 03/21/07
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant If Signed by Witness and Date.

TX_00002295

USA_00019936

TEXAS VOTER REGISTRATION APPLICATION

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOITE(8683). TDD 1-800-735-2989. www.sos.state.tx.us

Qualifications

- You must register to vote in the county in which you reside
- You must be a citizen of the United States
- You must be at least 17 years and 10



236297413

completed all or your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

this form. Please pass it on to someone who could use it.

Este formulario para registrarse para votar tambien esta disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one: ☐ New ☐ Change ☐ Replacement

Are you a United States Citizen? ☒ Yes ☐ No

Will you be 18 years of age on or before election day? ☐ Yes ☒ No

If you checked "no" in response to either of these questions, do not complete this form.

Have you ever voted in this county or a federal office? ☒ Yes ☐ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Fold on line and seal before mailing

Last Name <u>WILLIAMS</u>	First Name <u>TONI</u>	Middle Name (if any)	Former Name
Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) <u>2519 Dashwood DR Apt 24</u>			
Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP. If mail cannot be delivered to your residence address. <u>2519 Dashwood DR Apt 24 Houston</u>			
Date of Birth: month, day, year	Gender (Optional) <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.	
TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number		I affirm that I - am a resident of this county; - have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and - have not been declared mentally incompetent by final judgment of a court of law.	
<input checked="" type="checkbox"/> Check if you do not have a social security, driver's license, or personal identification number		Date <u>3.12.07</u>	
Telephone Number, Include Area Code (Optional)		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. <u>X Toni Williams</u>	
City and County of Former Residence in Texas <u>EL PASO</u>			

Office of the Secretary of State
Toll Free
Si necesita asistencia
llame gratis al
1-800-252-VOTE(8683)
www.sos.state.tx.us

EL PASO TX 79901

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UNITED STATES

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POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

Houston TX 77024
77253



Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification, then give the last four digits of your social security number. If you do not have either of these identification numbers, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una versión en Español.

JA_005056

TX_00002297

USA_00019938

Texas Voter Registration Application

www.sos.state.tx.us

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989.

Qualifications

- You must register to vote in the county in which you reside.



236308697

or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen? ☒ Yes ☐ No

If you are 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "no" in response to either of these questions, do not complete this form.

Have you ever voted in this county for a federal office? ☒ Yes ☐ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Last Name

Williams

First Name

TYRONE

Middle Name (if any)

Former Name

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr. Houston, Texas, 77024

Mailing Address: Address, City, State and ZIP. If mail cannot be delivered to your residence address.

2519 Dashwood Dr. Houston Texas 77024

Date of Birth: month, day, year

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal ID No.

(Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number

☒ Check if you do not have a social security, driver's license, or personal identification number

Telephone Number, Include Area Code (Optional)

City and County of Former Residence In Texas

EL Paso

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

02/28/07

Date

X (Adore) Chanel Johnson

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance Call
Office of the Secretary of State
Toll Free:
Si necesita asistencia
llame gratis al:
1-800-252-VOTE(8683) 26
www.sos.state.tx.us

EL PASO TX 7991

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FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

Houston , tx 77024

Field on dotted line and use black marker.

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number. If you do not have either of these identification numbers, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

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Secretario de Estado al 1-800-252-8683 para
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Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236598650

- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could benefit.

Printed by the state, under authority of law. For completion only.

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Complete These Questions before Proceeding

Check one ☐ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

Are you interested in serving as an election worker?

☒ Yes ☐ No

- Continue below to complete application.

Last Name: Williams First Name: Valery Middle Name (if any): _____ Former Name: _____

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Route.) P.O. Box 2365 Houston TX 77023

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address, 2519 Dashwood Dr Apt. 24 Houston TX

Date of Birth: month, day, year 3-8-83 Gender (Optional) ☐ Male ☒ Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code (Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Valery Williams Date: 032107

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: Si necesita asistencia
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us



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REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

APR 02 2007 10:27
(ZIP CODE)



Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

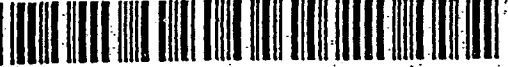
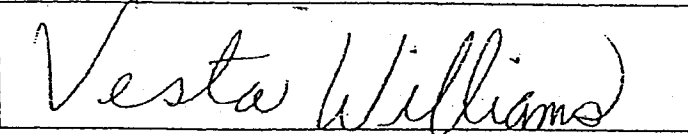
Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

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Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una versión en Español.

Voter Registration Application

Before completing this form, review the General, Application, and State specific instructions.

Are you a citizen of the United States of America?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	This space for office use only. 6B37622-4	
Are you 18 years old on or before election day?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	78 Harris	
If you checked "No" in response to either of these questions, do not complete form. (See state-specific instructions for rules regarding eligibility to register prior to age 18.)					
(Circle one) Mr. Mrs. Miss Ms.	Last Name Williams	First Name Vesta	Middle Name(s)	(Circle one) Jr Sr II III IV	
Home Address 2519 DASHWOOD DR		Apt. or Lot # 24	City/Town HOUSTON	State TEXAS	Zip Code 77024
Address Where You Get Your Mail If Different From Above			City/Town	State	Zip Code
Date of Birth 04/15/85		Telephone Number (optional)	ID Number - (See item 6 in the instructions for your state)		
Month Day Year					
Choice of Party (see item 7 in the instructions for your state)	Democrat	Race or Ethnic Group (see item 8 in the instructions for your state)	Black		
I have reviewed my state's instructions and I swear/affirm that:		 236524739			
y false		Please sign full name (or put mark) 			
citizen, deported from or refused entry to the United States.		Date: 03/13/2007 Month Day Year			

If you are registering to vote for the first time: please refer to the application instructions for information on submitting copies of valid identification documents with this form.

Please fill out the sections below if they apply to you.

If this application is for a change of name, what was your name before you changed it?

A	Mr. Mrs. Miss Ms.	Last Name	First Name	Middle Name(s)	(Circle one) Jr Sr II III IV
If you were registered before but this is the first time you are registering from the address in Box 2, what was your address where you were registered before?					
B	Street (or route and box number)		Apt. or Lot #	City/Town/County	State Zip Code

If you live in a rural area but do not have a street number, or if you have no address, please show on the map where you live.

C		Write in the names of the crossroads (or streets) nearest to where you live. Draw an X to show where you live. Use a dot to show any schools, churches, stores, or other landmarks near where you live, and write the name of the landmark.		NORTH ↑
Example	Route #2	Grocery Store		
Public School		Woodchuck Road X		

If the applicant is unable to sign, who helped the applicant fill out this application? Give name, address and phone number (phone number optional).

D	
---	--

Mail this application to the address provided for your State.

TX_0002302
JA_005061

TX_0002302

USA_00019943

SECRETARY OF STATE
ELECTIONS DIVISION
PO BOX 12060
AUSTIN, TEXAS 78711-2060

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STATE OF TEXAS
STATE PENALTY
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HON. PAUL BETTENCOURT
TAX ASSESSOR-COLLECTOR
HARRIS COUNTY
P.O. BOX 3527
HOUSTON, TX 77253-3527

MAR 28 2007 10:57

PARCEL POST



TX_00002303
JA_005062

TX_00002303

USA_00019944

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: *Si necesita asistencia*
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us



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REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

_____.TX_____

Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una version en Español.

TX_00002304
JA_005063

TX_00002304

USA_00019945

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us

Qualifications

- You must register to vote in the county in which you reside
- You must be a citizen of the United States

Y
n
y



Y 236308928

february, 2012
completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☐ New ☐ Change ☐ Replacement

Are you a United States Citizen? ☐ Yes ☐ No

you be 18 years of age on or re election day? ☐ Yes ☐ No

u checked "no" in response to either of these ques- s do not complete this form.

e you ever voted in this county a federal office? ☐ Yes ☐ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Full on line and seal before mailing

Last Name | First Name | Middle Name (if any) | Former Name
Williams | Wayne | |

Residence Address: Street Address and Apartment Number, City, State, and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr, Houston, TX. 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP. If mail cannot be delivered to your residence address.

2519 Dashwood Dr, Houston, TX. 77024

Date of Birth: month, day, year

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number

☒ Check if you do not have a social security, driver's license, or personal identification number

Telephone Number, Include Area Code (Optional)

City and County of Former Residence in Texas

EL PASO

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felony I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

02/28/12
Date

X

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

Toll Free
 Si necesita asistencia
 llame gratis al
 1-800-252-VOTE(8683)
 www.sos.state.tx.us

EL PASO TX 799

26 FEB 2007 PM 1:1

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REGISTRAR OF VOTERS
 COUNTY COURTHOUSE
 (CITY)

(ZIP CODE)

Houston TX 77004

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Fold on line and seal before mailing.

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or personal identification number, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

Este formulario está disponible en Español.
 Para obtener su cargo a la oficina del
 registrador de votantes llame al 1-800-252-8683 para
 conseguir una versión en Español.

JA_005065

TX_00002306

USA_00019947

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.



236308795

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

This form. Please pass it on to someone who could use it.

Presented by the Office of the Secretary of State
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Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one: ☐ New ☐ Change ☐ Replacement

Are you a United States Citizen? ☒ Yes ☐ No

If you be 18 years of age on or over election day? ☒ Yes ☐ No

If you checked "no" in response to either of these questions, do not complete this form.

Have you ever voted in this county for a federal office? ☒ Yes ☐ No

If you answered "no" to this question, be sure to see special instructions regarding identification requirements on the reverse side of the application.

- Continue below to complete application.

Fill on line and seal before mailing.

Last Name: Williams First Name: Wesley Middle Name (if any): _____ Former Name: _____

Residence Address: Street Address and Apartment Number, City, State and ZIP. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) 2519 Dashwood Dr, Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP. If mail cannot be delivered to your residence address. 2519 Dashwood Dr, Houston, TX 77024

Date of Birth: month, day, year _____ Gender (Optional) ☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety) If none, give last 4 digits of your Social Security Number _____

☒ Check if you do not have a social security, driver's license, or personal identification number

Telephone Number, Include Area Code (Optional) _____

City and County of Former Residence in Texas

EL PASO

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

02/28/12
Date

X

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance Call
 Office of the Secretary of State
 Toll Free
 Si necesita asistencia
 llame gratis al
 1-800-252-VOTE(8683)
 www.sos.state.tx.us

EL PASO TX

26 FEB 2007 PM

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REGISTRAR OF VOTERS
 COUNTY COURTHOUSE
 (CITY)

ZIP CODE)

Houston TX 77004



Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your driver's license or personal identification number. If you do not have a driver's license or p... then give the last four digits of ... if you do not have either of these identification numbers, then you must indicate by checking the box on the application side.

Identification Requirement

If you are submitting this form by mail and you are registering for the first time in this county, enclose a copy of one of the following with your application: a copy of a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address. If you do not enclose a copy of identification now and you are registering to vote by mail and have not voted in an election in this county for a federal office, you will be required to present such identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail.

For information in Spanish, contact the office of the Secretary of State at 1-800-252-8683 for a Spanish version.

JA_005067

TX_00002308

USA_00019949

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by election day.



236611733

...sion, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State VR17.06E.p65
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Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement
 Are you a United States Citizen? ☒ Yes ☐ No
 Will you be 18 years of age on or before election day? ☒ Yes ☐ No
 If you checked "no" on any response to either of the above, you must complete this form.
 Are you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

COPY

Last Name <i>Williams</i>	First Name <i>Peter</i>	Middle Name (If any)	Former Name
Residence Address: Street Address and Apartment Number, City, State and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) <i>2379 Dashwood Dr. Apt 24 Houston</i>			
Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your resident address. <i>same</i> <i>TX. 770</i>			
Date of Birth: month, day, year	Gender (Optional) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.	
TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)		I affirm that I • am a resident of this county; • have not been finally convicted of a felony or if a felon I have completed all of my punishment including a term of incarceration, parole, supervision, period of probation, or I have been pardoned; and • have not been declared mentally incompetent by final judgment of a court of law.	
<input checked="" type="checkbox"/> Check if you do not have a TX Driver's License, or Personal Identification Number		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date <i>X Peter Williams</i> <i>4/13/12</i>	
If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number			
<input checked="" type="checkbox"/> Check if you do not have a Social Security Number			
Telephone Number, Include Area Code. (Optional)			

TX_00002309
JA_005068

TX_00002309

USA_00019950

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For Assistance
 Call your local Voter Registrar or
 Office of the Secretary of State
 Toll Free: *Si necesita asistencia*
llame gratis al:
 1-800-252-VOTE(8683)
 www.sos.state.tx.us



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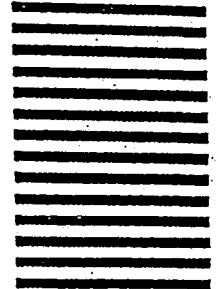
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REGISTRAR OF VOTERS
 COUNTY COURTHOUSE
 (CITY)

(ZIP CODE)

_____.TX_____



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General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Este formulario está disponible en Español. Favor de llamar sin cargo a la oficina del Secretario de Estado al 1-800-252-8683 para conseguir una versión en Español.

TX_00002310
 JA_005069

TX_00002310

USA_00019951

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by election day.



236611966

received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06 E.p65

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Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

- Check one ☒ New ☐ Change ☐ Replacement
- Are you a United States Citizen? ☒ Yes ☐ No
- Will you be 18 years of age on or before election day? ☒ Yes ☐ No
- Do you understand the consequences of giving false information on this form? ☒ Yes ☐ No
- Are you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

Last Name <u>Williams</u>	First Name <u>Anthony</u>	Middle Name (if any)	Former Name
Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) <u>2519 Dashwood Dr. Apt. 24 Houston TX 77020</u>			
Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address. <u>Same TX 77020</u>			
Date of Birth: month, day, year	Gender (Optional) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both. I affirm that I • am a resident of this county; • have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and • have not been declared mentally incompetent by final judgment of a court of law.	
TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)			
<input checked="" type="checkbox"/> Check if you do not have a TX Driver's License, or Personal Identification Number If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number			
<input checked="" type="checkbox"/> Check if you do not have a Social Security Number			
Telephone Number, Include Area Code (Optional)		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date <u>X Anthony Williams</u> 11/04/130'	

TX_00002311
JA_005070

TX_00002311

USA_00019952

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: *Si necesita asistencia*
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us



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POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

_____, TX _____

Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una version en Español.

TX_00002312
JA_005071

TX_00002312

USA_00019953

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.
- You must be at least 17 years and 10 months old to register, and you must be 18 years of age by election day.



236611957

received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need to update your address, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State VRS

For Official Use Only

170512

Este formulario para inscribirse para votar está disponible en Español. Para conseguir en Español favor de llamar sin cargo 252-8683 a la oficina del Secretario de Es

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ YesWill you be 18 years of age on or before election day? ☒ Yes

If you checked "No" in response to either of these questions, you must not complete this form.

Are you interested in serving as an election worker? ☒ Yes

- Continue below to complete application.

Last Name First Name Middle Name (if any) Former Name

Williams Troy

Residence Address: Street Address and Apartment Number, City, State and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) 2519 DASHWOOD DR APT 24 HOUSTON TX 77061

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your address, address. 77061

Date of Birth: month, day, year Gender (Optional) ☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☐ Check if you do not have a Social Security Number

Telephone Number, Include Area Code (Optional)

I understand that giving false information to pre-register is perjury, and a crime under federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or I have completed all of my punishment including term of incarceration, parole, supervision, probation, or I have been pardoned; and
- have not been declared mentally incompetent judgment of a court of law.

X Troy Williams 04
Signature of Applicant or Agent and Relationship to or Printed Name of Applicant if Signed by WitnessTX_00002313
JA_005072

TX_00002313

USA_00019954

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683). TDD 1-800-735-2989. www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside



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- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☐ New ☐ Change ☐ Replacement

Are you a United States Citizen? ☒ Yes ☐ No

Will you be 18 years of age on or before election day? ☒ Yes ☐ No

Are you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

Last Name Williams First Name Edward Middle Name (if any) Former Name

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) 2519 Dashwood Dr Apt. 24

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address. Houston, TX 77054

Date of Birth: month, day, year Gender (Optional) ☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code (Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Edward Williams 033007
 Date
 Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: Si necesita asistencia
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us

EL PASO TX 799

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NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE

(CITY)

(ZIP CODE)

Houston .TX 77024

2803140706

Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Si usted no tiene una licencia de conducir de Texas o un número de seguridad social, será requerido presentar identificación cuando vote en persona o encerrar una copia de tal identificación con su boleto de voto si vota por correo. En su lugar, puede encerrar una copia de uno de los siguientes con esta aplicación de registro de votante. La identificación incluye: una identificación actual y válida; una copia de un recibo de servicios públicos actual; un estado de cuenta bancario; un cheque gubernamental; un cheque de pago; o cualquier otro documento gubernamental que muestre su nombre y dirección.

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236760894

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement
 Are you a United States Citizen? ☒ Yes ☐ No

Are you 18 years of age on or before election day? ☒ Yes ☐ No

Are you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

Last Name Williams First Name Gerald Middle Name (if any) Former Name

Residence Address: Street Address and Apartment Number, City, State and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) 2519 Dashwood Dr Apt 24 Houston TX

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address. same

Date of Birth: month, day, year Gender (Optional) ☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No. (Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☐ Check if you do not have a Social Security Number

Telephone Number, Include Area Code (Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

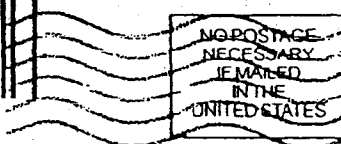
I affirm that I
 • am a resident of this county;
 • have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
 • have not been declared mentally incompetent by final judgment of a court of law.

X Gerald Williams Date 4/06/07
 Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: *Si necesita asistencia*
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us

EL PASO TX 799

07 APR 2007 PM 2 L



BUSINESS REPLY MAIL

FIRST CLASS MAIL PERMIT NO. 4511 AUSTIN, TX

POSTAGE WILL BE PAID BY ADDRESSEE

REGISTRAR OF VOTERS
COUNTY COURTHOUSE

(CITY)

Houston, TX

(ZIP CODE)

77253



Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una version en Español.

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ID: 672627 Page 2 of 2

TX_00002317

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Voter Registration Application

complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, sos.state.tx.us.

Qualifications

You must register to vote in the county in which you reside.



236761697

You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State VR17.06E.p65

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Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ Replace rent

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?

☒ Yes ☐ No

• Continue below to complete application.

Name First Name Middle Name (if any) Former Name

Williams Linda

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr. Apt 24 Houston TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

2519 Dashwood Dr. Apt 24 Houston TX 77024

Date of Birth: month, day, year

Gender (Optional)

☐ Male ☒ Female

☒ Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number. Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Linda Williams 1-4-04-07
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPY

TX_00002318
JA_005077

TX_00002318

USA_00019959

Voter Registration Application

complete sections by printing legibly. If you have questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 252-VOTE(8683), TDD 1-800-735-2989, or os.state.tx.us.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Qualifications

You must register to vote in the county in which you reside.

Complete These Questions before Proceeding

Check one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Are you 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?

☒ Yes ☐ No

• Continue below to complete application.

any, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Name First Name Middle Name (if any) Former Name

Williams Judy

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include box or Rural Rt.)

2519 Dashwood Dr. Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence, use P.O. Box.

2519 Dashwood Dr Apt 24, Houston, TX 77024

Date of Birth: month, day, year

Gender (Optional)

☐ Male ☒ Female

Driver's License No. or Personal I.D. No.

Issued by the Department of Public Safety)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

Check if you do not have a TX Driver's License, or Personal Identification Number

TX Driver's License or Personal Identification, provide last 4 digits of your Social Security Number

Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

Judy Williams

Date

COPY

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Voter Registration Application

Complete sections by printing legibly. If you have questions about how to fill out this application, call your local voter registrar or the Texas Secretary of State's Office toll free at 1-800-2-VOTE(8683), TDD 1-800-735-2989, or www.sos.state.tx.us.

Registrations

You must register to vote in the county in which you reside.



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If you are a felon, you must have completed all of your punishment, including term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Complete These Questions Before Proceeding

- Check one ☐ New ☐ Change ☐ Replacement
- Are you a United States Citizen? ☒ Yes ☐ No
- Are you 18 years of age on or before election day? ☒ Yes ☐ No
- If you checked "no" in response to either of the above, do not complete this form.
- Are you interested in serving as an election worker? ☐ Yes ☒ No

• Continue below to complete application.

Name: Last Name First Name Middle Name (If any) Former Name

Williams Shaka

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box)

519 Dasherwood Dr Apt 24 Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP Code. If mail cannot be delivered to your residence

519 Dasherwood Dr Apt 24 Houston, TX 77024

Date of Birth: month, day, year Gender (Optional) ☐ Male ☒ Female

Driver's License No. or Personal I.D. No. as issued by the Department of Public Safety

Check if you do not have a TX Driver's License, or Personal Identification Number

or TX Driver's License or Personal Identification, last 4 digits of your Social Security Number

Check if you do not have a Social Security Number

Phone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Shaka Williams Date 4.8.07
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPY

TX_00002320
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TX_00002320

USA_00019961

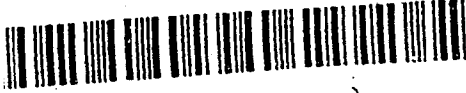
oter Registration Application

plete sections by printing legibly. If you
uestions about how to fill out this applica-
e call your local voter registrar or the
of State's Office toll free at
-VOTE(8683), TDD 1-800-735-2989,
state.tx.us.

ations

ust register to vote in the county in
you reside.

ust be a citizen of the United States



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period of probation, or you must have
ved a pardon.

If you are already registered to vote, you do not need to com-
plete this form. If you have moved, you must complete this
form to update your address. If you do not need this form,
please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR12.06E.p63

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está disponible en Español. Para conseguir la ver-
sion en Español favor de llamar sin cargo 1-800-
252-8683 a la oficina del Secretario de Estado.

**Complete These Questions
Before Proceeding**Check one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☐ Yes ☒ NoWill you be 18 years of age on or
before election day?☒ Yes ☐ No

If you checked "no" in response to either of the above, do
not complete this form.

Are you interested in serving as
an election worker?☒ Yes ☐ No

• Continue below to complete application.

First Name Middle Name (if any) Former Name

Hans Mary

Street Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include
or Rural Rte.)

379 DASHWOOD DR. Apt. 24, Houston, TX. 77024

P.O. Address: Street Address and Apartment Number, P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence

2519 DASHWOOD DR. Apt. 24, Houston, TX. 77024

Date of Birth: month, day, year

Gender (Optional)

☐ Male ☒ Female

Driver's License No. or Personal ID. No.

by the Department of Public Safety)

Check if you do not have a TX Driver's License, or
Personal Identification Number.TX Driver's License or Personal Identification,
last 4 digits of your Social Security NumberCheck if you do not have a Social
Security Number

Phone Number, Include Area Code

(Optional)

Signature of Applicant or Agent and Relationship to Applicant
or Printed Name of Applicant if Signed by Witness and Date.

X Mary Williams Date 11/04/04/07

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oter Registration Application

plete sections by printing legibly. If you
uestions about how to fill out this applica-
se call your local voter registrar or the
of State's Office toll free at
2-VOTE(8683), TDD 1-800-735-2989,
state.tx.us.

ations

ust register to vote in the county in
you reside.



6686074

must not be finally convicted of a
y; or if you are a felon, you must have
leted all of your punishment, including
erm of incarceration, parole, supervi-
period of probation, or you must have
ved a pardon.

If you are already registered to vote, you do not need to com-
plete this form. If you have moved, you must complete this
form to update your address. If you do not need this form,
please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06E.p65

For Official Use Only

Este formulario para inscribirse para votar tambien
está disponible en Español. Para conseguir la ver-
sion en Español favor de llamar sin cargo 1-800-
252-8683 a la oficina del Secretario de Estado.

**Complete These Questions
Before Proceeding**Check one ☒ New ☐ Change ☐ ReapplicationAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or
before election day? ☒ Yes ☐ NoIf you checked "no" in response to either of the above, do
not complete this form.Are you interested in serving as
an election worker? ☐ Yes ☒ No

• Continue below to complete application.

First Name Middle Name (if any) Former Name

Hans Jonathan

Street Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include
Rural Rte.)619 DASHWOOD DR. APT 24 HOUSTON TX 77024
1519 DASHWOOD DR. APT 24 HOUSTON TX 77024Date of Birth: month, day, year Gender (Optional)
☐ Male ☒ Female

Driver's License No. or Personal I.D. No.

by the Department of Public Safety)

Check if you do not have a TX Driver's License, or
Personal Identification NumberTX Driver's License or Personal Identification,
last 4 digits of your Social Security NumberCheck if you do not have a Social
Security Number

Phone Number, Include Area Code

(Optional)

Signature of Applicant or Agent and Relationship to Applicant
or Printed Name of Applicant if Signed by Witness and Date.

I understand that giving false information to procure a
voter registration is perjury, and a crime under state and
federal law. Conviction of this crime may result in
imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon
I have completed all of my punishment including any
term of incarceration, parole, supervision, period of
probation, or I have been pardoned; and
- have not been declared mentally incompetent by final
judgment of a court of law.

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USA_00019963

Voter Registration Application

Complete sections by printing legibly. If you have questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-52-VOTE(8683), TDD 1-800-735-2989, or www.sos.state.tx.us.

Registrations

You must register to vote in the county in which you reside.



36686065

If you are currently in prison, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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For Official Use Only

Harris 178

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement
Are you a United States citizen? ☒ Yes ☐ No
Will you be 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

Name: First Name Middle Name (if any) Former Name

Williams Christhawn

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box)

519 DASHWOOD DR. Apt 24, Houston, TX. 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence

519 DASHWOOD DR. Apt 24 Houston, TX. 77024

Date of Birth: month, day, year Gender (Optional)
☐ Male ☒ Female

Driver's License No. or Personal I.D. No.
Issued by the Department of Public Safety

Check if you do not have a TX Driver's License, or Personal Identification Number

or TX Driver's License or Personal Identification, last 4 digits of your Social Security Number

Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Christhawn Williams Date 04/04/07

COPY

TX_00002323
JA_005082

TX_00002323

USA_00019964

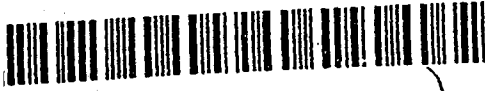
Voter Registration Application

Complete sections by printing legibly. If you have questions about how to fill out this application, call your local voter registrar or the Secretary of State's Office toll free at 1-800-2-VOTE(8683), TDD 1-800-735-2989, or www.sos.state.tx.us.

Qualifications

You must register to vote in the county in which you reside.

You must be a citizen of the United States.



236686056

If you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Harris 17

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one: ☒ New ☐ Change ☐ Renewal
Are you a United States Citizen? ☒ Yes ☐ No
Are you 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

Name: First Name Middle Name (if any) Former Name

Harris Wanda

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box)

2519 Dashwood Dr. Apt 24, Houston, TX, 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP Code. If mail cannot be delivered to your residence, include a return address.

2519 Dashwood Dr. Apt. 24, Houston, TX, 77024

Date of Birth: month, day, year Gender (Optional)
☐ Male ☒ Female

Driver's License No. or Personal I.D. No.
(by the Department of Public Safety)

Check if you do not have a TX Driver's License, or Personal Identification Number

TX Driver's License or Personal Identification, last 4 digits of your Social Security Number

Check if you do not have a Social Security Number

Phone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Wanda Williams Date 4-28-07

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

CORXTX_00002324
JA_005083

TX_00002324

USA_00019965

Voter Registration Application

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State VR17.06E.p65

For Official Use Only

Harris 28 17

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Are you ☒ New ☐ Change ☐ Replacement
 a United States Citizen? ☒ Yes ☐ No
 Are you 18 years of age on or
 election day? ☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as
 an election worker? ☒ Yes ☐ No

• Continue below to complete application.



236686047

You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Name First Name Middle Name (if any) Former Name

Williams - Shelia Denise Dentise

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. (If none, describe where you live. (Do not include Box or Rural P.O.))

2519 Dashwood Dr Apt. 24 Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP Code. If mail cannot be delivered to your residence

2519 Dashwood Dr Apt. 24 Houston, TX 77024

Date of Birth: month, day, year Gender (Optional)
☐ Male ☒ Female

Driver's License No. or Personal I.D. No.
 issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or
 Personal Identification Number

☒ No TX Driver's License or Personal Identification,
 give last 4 digits of your Social Security Number

☒ Check if you do not have a Social
 Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Shelia Denise Williams Date 6/24/07

Signature of Applicant or Agent and Relationship to Applicant
 or Printed Name of Applicant if Signed by Witness and Date.

COPY

TX_00002325
 JA_005084

TX_00002325

USA_00019966

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236686010

- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06E.p65

For Official Use Only

Harris 17

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?

☒ Yes ☐ No

- Continue below to complete application.

Last Name

First Name

Middle Name (if any)

Former Name

Williams

Bernard

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural R.L.)

2519 Dashwood Dr. Apt. 24

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

Houston, TX 77024

Date of Birth: month, day, year

7-14-80

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Bernard Williams 33007

Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPYTX_00002326
JA_005085

TX_00002326

USA_00019967

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236686001

- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17 06E.p65

For Official Use Only

Harris 17

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?

☒ Yes ☐ No

- Continue below to complete application.

Last Name

First Name

Middle Name (if any)

Former Name

Williams

Arthur

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood DR, Apt. 24

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

Houston, TX 77024

Date of Birth: month, day, year

7-14-80

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Arthur Williams
Date 3-30-07
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPYTX_00002327
JA_005086

TX_00002327

USA_00019968

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236685994

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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VR17 04E.p63

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HOMES ID

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "No" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? ☐ Yes ☒ No

- Continue below to complete application.

Last Name

First Name

Middle Name (If any)

Former Name

Williams

Ronald

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

Date of Birth: month, day, year

Gender (Optional)

3-10-83

☒ Male ☐ FemaleTX Driver's License No. or Personal I.D. No.
(Issued by the Department of Public Safety)☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X

Ronald Williams

-Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPYTX_00002328
JA_005087

TX_00002328

USA_00019969

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.



236685985

- You must not be a felon, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VK17 B&E p63

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Harris 17

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

Last Name

First Name

Middle Name (if any)

Former Name

Williams

James

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural R.)

2519 Dashedwood Dr Apt 24 Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

Date of Birth: month, day, year

3-10-83

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X

James Williams

Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPY

TX_00002329
JA_005088

TX_00002329

USA_00019970

Complete sections by printing legibly. If you have questions about how to fill out this application call your local voter registrar or the Secretary of State's Office toll free at 1-800-2-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Instructions

You must register to vote in the county in which you reside.



236686038

Any, or if you are a felon, you must have completed all of your punishment, including term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State VRI17.06E.p65
For Official Use Only
Harris 17

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

- Mark one ☒ New ☐ Change ☐ Replacement
- Are you a United States Citizen? ☒ Yes ☐ No
- Are you at least 18 years of age on or before election day? ☒ Yes ☐ No
- If you checked "no" in response to either of the above, do not complete this form.
- Are you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

Last Name		First Name	Middle Name (If any)	Former Name
Williams		Alice		
Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)				
2519 Dashwood Dr. Apt. 24 Houston, TX 77024				
Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence, include a return address.				
2519 Dashwood Dr. Apt. 24 Houston, TX 77024				
Date of Birth: month, day, year	Gender (Optional) <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female			
I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.				
I affirm that I				
<ul style="list-style-type: none"> • am a resident of this county; • have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and • have not been declared mentally incompetent by final judgment of a court of law. 				
Check if you do not have a TX Driver's License, or Personal Identification Number		Date		
<input checked="" type="checkbox"/> I have a TX Driver's License or Personal Identification, and I have provided the last 4 digits of your Social Security Number		4.09.07		
Check if you do not have a Social Security Number		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.		
<input checked="" type="checkbox"/> I have a Social Security Number		X Alice Williams		
Telephone Number, Include Area Code (Optional)				

COPY

TX_00002330
JA_005089

TX_00002330

USA_00019971

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.



236686029

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06E p65

For Official Use Only

11/8-11/5 17

Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la version en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☐ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or before election day? ☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

Last Name

First Name

Middle Name (if any)

Former Name

Williams

Calvert

Residence Address: Street Address and Apartment Number, City, State and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Daskwood Dr Apt. 24 Houston, TX.

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

77024

Date of Birth: month, day, year

Gender (Optional)

4-15-85

☒ Male ☐ Female

TX Driver's License No. or Personal I.D. No.

(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Calvert Williams

03,3007

Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPYTX_00002331
JA_005090

TX_00002331

USA_00019972

Voter Registration Application

complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Texas Secretary of State's Office toll free at 1-800-368-6833, TDD 1-800-735-2989, or os.state.tx.us.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR 17.06E.p65

For Official Use Only

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Qualifications

You must register to vote in the county in which you reside.

You must be a citizen of the United States.



236686118

If you are a felon, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Complete These Questions Before Proceeding

Are you ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

If you checked "no" in response to either of the above, do not complete this form.

Are you interested in serving as an election worker?

☒ Yes ☐ No

• Continue below to complete application.

Name First Name Middle Name (if any) Former Name

Williams Angela A

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr. Apt. 24, Houston, TX 77024

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence, use P.O. Box.

2519 Dashwood Dr. Apt. 24, Houston, TX 77024

Date of Birth: month, day, year

Gender (Optional)

☐ Male ☒ Female

Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

Check if you do not have a Social Security Number

Telephone Number, including Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Angela Williams Date 06/04/12
Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

COPY

TX_00002332
JA_005091

TX_00002332

USA_00019973

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

Last Name First Name Middle Name (If any) Former Name

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)
 2519 DASHWOOD DR. Apt 24. Houston, TX

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.
 (SAME) 77024

Date of Birth: month, day, year Gender (Optional)
☐ Male ☒ Female

TX Driver's License No. or Personal I.D. No.
 (Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code
 (Optional)

plete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

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Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement
 Are you a United States Citizen? ☒ Yes ☐ No
 Are you 18 years of age on or before election day? ☒ Yes ☐ No

Are you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

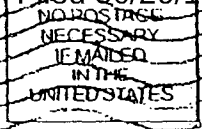
I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.
 I affirm that I
 • am a resident of this county;
 • have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
 • have not been declared mentally incompetent by final judgment of a court of law.

X Alicia Williams Date 04/16/07
 Signature of Applicant or Agent and Relationship to Applicant
 as Printed Name of Applicant if Signed by Witness and Date.

Record ID: 61439709 Imaging Dept ID: 136774390
Case 12-CV-00126-RMC-DST-RLW Document 212-3 Filed 06/20/12
For more information, call your local Voter Registrar or
Office of the Secretary of State
Toll Free: Si necesita asistencia
llame gratis al: 1-800-252-VOTE(8683)
www.sos.state.tx.us

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REGISTRAR OF VOTERS
COUNTY COURTHOUSE
(CITY)

(ZIP CODE)

Houston, TX 77024



Fold on line and seal before mailing

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

indicate by checking the appropriate box on the application side.

Identification Requirement

If you do not have a Texas driver's license or a social security number, you will be required to present identification when you vote in person or enclose a copy of such identification with your ballot if you vote by mail. Instead, you may enclose a copy of one of the following with this voter registration application. Identification includes: a current and valid ID; a copy of a current utility bill; bank statement; government check; paycheck; or other government document that shows your name and address.

Este formulario está disponible en Español.
Favor de llamar sin cargo a la oficina del
Secretario de Estado al 1-800-252-8683 para
conseguir una version en Español.

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in



236958146

- You must not be finally convicted of a felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Provided by the Office of the Secretary of State

VR17, 84E, p.1

For Official Use Only

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Este formulario para inscribirse para votar tambien está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☒ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or before election day? ☒ Yes ☐ NoAre you interested in serving as an election worker? ☒ Yes ☐ No

- Continue below to complete application.

Last Name <u>Williams</u>	First Name <u>Cindy</u>	Middle Name (if any)	Former Name
Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) <u>2519 Dastum Dr. Apt. 24, Houston, TX</u>			
Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address. <u>same</u>			
Date of Birth: month, day, year	Gender (Optional) <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.	
TX Driver's License No. or Personal ID. No. (Issued by the Department of Public Safety)		I affirm that I	
<input checked="" type="checkbox"/> Check if you do not have a TX Driver's License, or Personal Identification Number		<ul style="list-style-type: none"> am a resident of this county; have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation; or I have been pardoned; and have not been declared mentally incompetent by final judgment of a court of law. 	
<input checked="" type="checkbox"/> Check if you do not have a Social Security Number		<div style="text-align: right;"> <u>4/16/05</u> Date </div>	
Telephone Number, Include Area Code (Optional)		Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date. <u>X Cindy Williams</u>	

pe: VOTER Record ID: 61440137 Imaging Dept. ID: 2603006 VJ
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Fold on line and seal before mailing

For Assistance
Call your local Voter Registrar or
Office of the Secretary of S
Toll Free. SI necessary aside
Name gratis at:
1-800-252-VOTE(8683)
www.sos.state.tx.us

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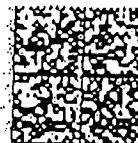
General Information

- Your voter registration days after it is received, whichever is later.
- If you move to another county, you must re-register in the county you have declined to register in.
- If you decline to register in a county, you will be considered a voter for election purposes. If you identify of the office (if submitted a voter registration purposes).
- You must provide your personal identification have a driver's license (number, then give the social security number of these identification).



SECRETARY OF STATE
ELECTIONS DIVISION
P.O. Box 12060
Austin, Texas 78711-2060

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STATE OF TEXAS
STATE PENALTY
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TAX ASSESSOR-COLLECTOR
HARRIS COUNTY
P.O. BOX 3527
HOUSTON, TEXAS 77253-3527

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Type: VOTER Record ID: 61440111 Imaging Dept. ID: 236958137

Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.



236958137

felony, or if you are a felon, you must have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR 17.04E, 6/15

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Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before ProceedingCheck one ☐ New ☐ Change ☐ ReplacementAre you a United States Citizen? ☒ Yes ☐ NoWill you be 18 years of age on or before election day? ☒ Yes ☐ NoAre you interested in serving as an election worker? ☒ Yes ☐ No

• Continue below to complete application.

Last Name First Name Middle Name (if any) Former Name

Williams Harry

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.)

2519 Dashwood Dr. Apt. 24, Houston, TX

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State and ZIP Code. If mail cannot be delivered to your residence address.

SAME 77024

Date of Birth: month, day, year Gender (Optional) ☒ Male ☐ FemaleTX Driver's License No. or Personal I.D. No.
(Issued by the Department of Public Safety)☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security NumberTelephone Number, include Area Code
(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

TX_00002337

USA_00019978

67661000 VSN

833Z0000-XL

VOTER Record ID: 61440111 Imaging Dept ID: 236958137

Fold on line and seal before mailing

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free; Si necesita asistencia
llame gratis al:
1-800-252-VOTE(8683)
www.sos.state.tx.us

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REGISTRAR OF VOTE
COUNTY COURTHOUSE
(CITY)



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NECESSARY
IF MAILED
IN THE
UNITED STATES



OFFICIAL BUSINESS
STATE OF TEXAS
STATE PENALTY
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Fold on line and seal

General Information

- Your voter registration will become effective 30 days after it is received or on your 18th birthday, whichever is later.
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- If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for registration purposes. If you do register to vote, the identity of the office (if applicable) at which you submitted a voter registration application will remain confidential and will be used only for voter registration purposes.
- You must provide your Texas driver's license or personal identification number. If you do not have a driver's license or personal identification number, then give the last four digits of your social security number or if you do not have any of these identification numbers, then you must

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1-800-252-8683 para
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SECRETARY OF STATE
ELECTIONS DIVISION
P.O. Box 12060
Austin, Texas 78711-2060



Texas Voter Registration Application

Please complete sections by printing legibly. If you have any questions about how to fill out this application, please call your local voter registrar or the Secretary of State's Office toll free at 1-800-252-VOTE(8683), TDD 1-800-735-2989, www.sos.state.tx.us.

Qualifications

- You must register to vote in the county in which you reside.
- You must be a citizen of the United States.



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felony, or if you are a felon, you have completed all of your punishment, including any term of incarceration, parole, supervision, period of probation, or you must have received a pardon.

If you are already registered to vote, you do not need to complete this form. If you have moved, you must complete this form to update your address. If you do not need this form, please pass it on to someone who could use it.

Prescribed by the Office of the Secretary of State

VR17.06E.065

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Horis 17

Este formulario para inscribirse para votar también está disponible en Español. Para conseguir la versión en Español favor de llamar sin cargo 1-800-252-8683 a la oficina del Secretario de Estado.

Complete These Questions Before Proceeding

Check one ☒ New ☐ Change ☐ Replacement

Are you a United States Citizen?

☒ Yes ☐ No

Will you be 18 years of age on or before election day?

☒ Yes ☐ No

Are you interested in serving as an election worker?

☒ Yes ☐ No

• Continue below to complete application.

Last Name First Name Middle Name (if any) Former Name

Williams Willie

Residence Address: Street Address and Apartment Number, City, State, and ZIP Code. If none, describe where you live. (Do not include P.O. Box or Rural Rt.) 2519 Dashwood Dr. Apt 24 Houston TX

Mailing Address: Street Address and Apartment Number or P.O. Box, City, State, and ZIP Code. If mail cannot be delivered to your residence address, SAME 77024

Date of Birth: month, day, year

Gender (Optional)

☒ Male ☐ Female

TX Driver's License No. or Personal ID. No.
(Issued by the Department of Public Safety)

☒ Check if you do not have a TX Driver's License, or Personal Identification Number

If no TX Driver's License or Personal Identification, give last 4 digits of your Social Security Number

☒ Check if you do not have a Social Security Number

Telephone Number, Include Area Code

(Optional)

I understand that giving false information to procure a voter registration is perjury, and a crime under state and federal law. Conviction of this crime may result in imprisonment up to 180 days, a fine up to \$2,000, or both.

I affirm that I

- am a resident of this county;
- have not been finally convicted of a felony or if a felon I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; and
- have not been declared mentally incompetent by final judgment of a court of law.

X Willie Williams 04/16/07
Date

Signature of Applicant or Agent and Relationship to Applicant or Printed Name of Applicant if Signed by Witness and Date.

VOTER Record ID: 61440095 Imaging Dept ID: 23672000-VI
660500_VJ

Fold on line and seal before mailing

For Assistance
Call your local Voter Registrar or
Office of the Secretary of State
Toll Free: 811 or call assistance
line gratis at:
1-800-252-VOTE(0663)
www.sos.state.tx.us

BUS
FIRST CLASS
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(CITY)



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General Informal

- Your voter registration will be valid for 30 days after it is received or on whichever is later.
- If you move to another county, you must re-register in the county of your new residence.
- If you decline to register, you have declined to register confidentially and will be unable to vote in person or by mail. If you do not register, your identity of the office (if any) will remain confidential and will not be used for registration purposes.
- You must provide your Texas personal identification number, driver's license or number, then give the last four digits of your social security number or other identification number.



SECRETARY OF STATE
ELECTIONS DIVISION
P.O. Box 12060
Austin, Texas 78711-2060

THE HONORABLE PAUL BETTENCOURT
TAX ASSESSOR-COLLECTOR
HARRIS COUNTY
P.O. BOX 3527
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UNITED STATES



Private box on the

If you are a voter's license or a
license holder, you will be required to
vote in person or
by mail with your
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joy this privilege by
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Identification
document a copy of a cur-
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able en Español.
a la oficina del
0-252-8683 para
más información.



ORDER DEFERRING ADJUDICATION OF GUILT

CAUSE NO.

863323

THE STATE OF TEXAS
VS.IN THE 183rd DISTRICT COURT

Janice Denise Shelvin

(Name of Defendant)

AKA

N/A

RECORDERS' EXEMPTION
This instrument is of legal quality
and not satisfactory for photographic
recording and/or alterations were
present at the time of filingCOUNTY CRIMINAL COURT
AT LAW NO.

OF HARRIS COUNTY, TEXAS

Date of
Order: 9-13-01Date of
Offense: 4-6-00Attorney
for State: Nicole DebordeAttorney
for Defendant: Chip Lewis☐ Defendant Waived CounselOffense: ~~3 yrs. DADJ / \$500 fine / 200 hrs. C.S. / LOA~~

purportedly acting as agent

☐ A MISDEMEANOR, CLASS: A : B : C ☒ A FELONY, DEGREE: SJ 1st 2nd 3rdTerms of Plea Bargain (In Detail): ~~purportedly acting as agent~~
3 YRS. DADJ / \$500 fine / 200 hrs. C.S. / LOA

(Circle appropriate selection - N/A = not available or not applicable)

Plea to Enhancement:	1st Paragraph	2nd Paragraph	Charging
Paragraph(s):	True Not True (N/A)	True Not True (N/A)	Instrument: Complaint Indictment Information
Findings on:	1st Paragraph	2nd Paragraph	
Enhancement(s):	True Not True (N/A)	True Not True (N/A)	Plea: Guilty Not Guilty
Affirmative Findings:			
Deadly	Family	Victim Selected	Victim Younger
Weapon: Yes No (N/A)	Violence: Yes No (N/A)	By Bias/Prejudice: Yes No (N/A)	Than 17 years: Yes No (N/A)
			Used to Commit Crime: Yes No (N/A)

ADJUDICATION OF GUILT DEFERRED

DEFENDANT PLACED ON COMMUNITY SUPERVISION FOR: 3 DAYS / MONTHS / YEARS

DEFENDANT ASSESSED A FINE IN THE AMOUNT OF

\$ 500.00

☐ SEE SPECIAL INSTRUCTIONS, incorporated herein by reference

Time	days toward	days toward	days toward incarceration,
Credited: N/A	incarceration N/A	fine and costs N/A	fine and costs

COURT COSTS: \$ 197.25

(Mark appropriate selections below, if applicable)

- ☐ Name changed from N/A
- ☐ Judgment Addendum incorporated herein by reference.
- ☐ It is ORDERED by the Court, that any weapon(s) seized in this case is/are hereby forfeited.
- ☐ In accordance with Section 12.44(b), Penal Laws of Texas, the Court authorizes the prosecuting attorney to prosecute this cause as a Class A misdemeanor.



SHELVIN

This cause being called for trial, in Harris County, Texas, unless otherwise referenced, the State appeared by her District Attorney as named above and the Defendant named above appeared in person with Counsel as named above, or the Defendant knowingly, intelligently, and voluntarily waived the right to representation by counsel as indicated above in writing in open court, and both parties announced ready for trial. The Defendant elected to proceed under Art. 42.12, 5(a) C.C.P., and in open court, having been waived, the Defendant pleaded as indicated above.

Thereupon, the Defendant was admonished by the Court of the consequences of the said plea, and the Defendant persisted in entering said plea, and it plainly appearing to the Court that the Defendant was mentally competent to stand trial and that the Defendant was uninfluenced by any consideration of fear, or persuasion or deusive hope of pardon prompting the Defendant plead as indicated above; the said plea was accepted by the Court. The Defendant having in open court, in writing, waived the appearance, confrontation, and cross-examination of witnesses, consented to the stipulation of evidence and to the introduction of testimony by affidavits, written statements of witnesses, and any other documentary evidence; and such waiver and consent having been approved by the Court in writing and filed in the papers of the cause, the said plea of the Defendant was received and entered of record.

The trial proceeded before the Court, and after the evidence was submitted and the argument of counsel thereon, the Court found that such evidence substantiates the Defendant's guilt in this cause, and further found that the best interests of society and of the Defendant would be served by deferring proceedings without entering an adjudication of guilt and placing the Defendant on Community Supervision in this cause.

IT IS ORDERED AND ADJUDGED that in accordance with Art. 42.12, 5(a) C.C.P., no judgment shall be entered in this cause and the Defendant is hereby placed on Community Supervision in this cause for a period as indicated above, from the date of this order, pending the Defendant's abiding by and not violating the terms and conditions of the Defendant's Community Supervision. Further, the court finds the Presentence Investigation, if so ordered, was done according to the applicable provisions of Art. 42.12, 9 C.C.P..

Signed and entered on

Sept. 13th, 2001

Joan Hoffman
Joan Hoffman
JUDGE PRESIDING

Community Supervision
Expires on:

09-12-2004

Notice of Appeal: _____

Mandate Received: _____

After Mandate Received, Sentence to Begin Date is: _____

Received on _____ at _____ AM | PM.
Sheriff, Harris County, Texas

By: _____ Deputy

1387798
Verified <u>RDR</u>
LCBT <u>SP</u>
LCBU <u>RDR</u>

SPECIAL INSTRUCTION OR NOTES: _____

Defendant's

CONDITIONS OF COMMUNITY SUPERVISION

THE STATE OF TEXAS
VS.
JANICE DENISE SHELVIN

IN THE 183rd DISTRICT COURT OF
HARRIS COUNTY, TEXAS
CAUSE NUMBER 863323

On this the 13TH day of SEPTEMBER, 2001, you are granted 3 years community supervision for the felony offense of PURPORTS TO ACT AS A VOTER AGENT in accordance with section 5 of Article 42.12, Texas Code of Criminal Procedure, in the 183rd District Court of Harris County, Texas, by the Honorable JOAN HUFFMAN, Judge Presiding. It is the order of this Court that you abide by the following Conditions of Community Supervision:

- (1) Commit no offense against the laws of this or any other State or of the United States.
- (2) Avoid injurious or vicious habits. You are forbidden to use, possess, or consume any controlled substance, dangerous drug, marijuana, alcohol or prescription drug not specifically prescribed to you by lawful prescription. You are forbidden to use, consume, or possess alcoholic beverages.
- (3) Avoid persons or places of disreputable or harmful character, specifically: _____.
- (4) Report immediately in person, to the Community Supervision Officer for the 183rd District Court on the 13TH day of SEPTEMBER, 2001 and continue to report to the Community Supervision Officer on the 13TH of each month thereafter or as directed by the Community Supervision Officer for the remainder of the supervision term unless so ordered differently by the Court. **APPOINTMENTS WILL NOT BE RESCHEDULED UNLESS APPROVED BY THE COURT THROUGH THE COMMUNITY SUPERVISION OFFICER**
- (5) Permit a Community Supervision Officer to visit you at your home, place of employment or elsewhere.
- (6) Abide by the rules and regulations of the Harris County Community Supervision and Corrections Department (hereinafter referred to as HCCS&CD). Refrain from disorderly conduct, abusive language or disturbing the peace while present at any HCCS&CD office or facility.
- (7) Work faithfully at suitable employment and present written verification of employment (including all attempts to secure employment) to your Community Supervision Officer on each reporting date. You must notify HCCS&CD within 48 hours of any change in your employment status.
- (6) Remain within a specified place, to wit: Harris County, Texas, or _____. You may not travel outside of Harris County, Texas, or _____ unless you receive prior written permission from the Court through your Community Supervision Officer. You must notify HCCS&CD within 48 hours of any change of residence.
- (9) Support your dependents as required by law. Provide your Community Supervision Officer with a certified copy of all Court orders requiring payment of child support.
- (10) Submit to RANDOM urine specimen analysis by authorized personnel of HCCS&CD, including any department having courtesy supervision jurisdiction. Provide proof of any medication legally prescribed to you prior to submitting a specimen.
- (11) Participate in the HCCS&CD Community Service Restitution Program (CSRP). You shall perform a total of 200 hours, at the rate of 15 hours per MONTH beginning OCTOBER 13, 2001.

Page 1 Conditions of Community Supervision
Revised: September 13, 2001

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JA_005102

TX_00002343

USA_00019984

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43455 10182

CONDITIONS OF COMMUNITY SUPERVISION

FOR: JANICE DENISE SHELVIN

CAUSE NUMBER: 863323

- (12) Pay the following fees through HCCS&CD as specified herein. All payments MUST be in the form of a money order or cashier's check. Personal checks will not be accepted.
- 12.1 Pay a Supervision Fee at the rate of \$40.00 per month for the duration of your community supervision beginning OCTOBER 13, 2001 to HCCS&CD.
- 12.2 Pay a Fine of \$500.00 and Court Costs of \$197.25 at the rate of \$25.00 per month beginning OCTOBER 13, 2001 to Harris County through HCCS&CD. You are given credit for 0 days.
- 12.3 Pay Laboratory Fees of \$5.00 per month for the duration of your community supervision beginning OCTOBER 13, 2001 to HCCS&CD.
- 12.4 Pay a \$10.00 fee for an Offender Identification Card by OCTOBER 13, 2001 to HCCS&CD.
- 12.15 Pay \$50.00 to the Crime Victims Compensation Fund at the rate of \$50.00 beginning OCTOBER 13, 2001 through HCCS&CD.
- (13) Report in person to HCCS&CD by OCTOBER 13, 2001 for the purpose of creating and obtaining your Offender Identification Card. You are to carry this identification card on your person at all times.
- (14) Submit to an alcohol/drug evaluation through the Treatment Alternative to Incarceration Program (TAIP) by NOVEMBER 13, 2001, and at anytime thereafter as directed by your Community Supervision Officer. Attend treatment and aftercare as recommended. Comply with all program rules, regulations and guidelines until successfully discharged or released by further order of the Court. On each reporting date, submit written verification of your enrollment, attendance and/or successful completion of the program to your Community Supervision Officer, to be retained in HCCS&CD's file.
- (15) Participate in the HCCS&CD Maximum Supervision Program any time that you are assessed by HCCS&CD to require maximum supervision. Comply with all program rules, regulations and guidelines until successfully discharged or released by further order of the Court.
- (16) Submit to an evaluation of your educational skill level by NOVEMBER 13, 2001. If it is determined that you have not attained the average skill of students who have completed the sixth grade in public schools in this State, you shall participate in the HCCS&CD program that teaches functionally illiterate persons to read.
- (17) You are not to lie or make false statements to any employee of HCCS&CD beginning SEPTEMBER 13, 2001.
- (18) You will not use, ingest, or consume any substance that will alter or adulterate any urinalysis results.
- (19) No mail-in reporting permitted except with the permission of the Court.
- (20) Do not enter into any agreement to work or act as a peace officer, law enforcement official or security guard of any law enforcement agency without the permission of the Court.

CONDITIONS OF COMMUNITY SUPERVISION

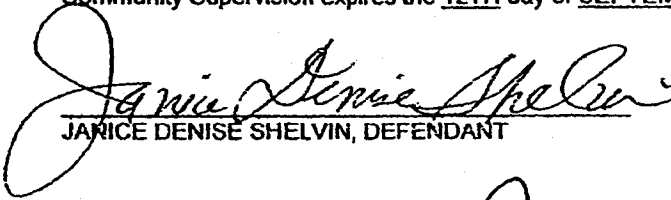
FOR: JANICE DENISE SHELVIN

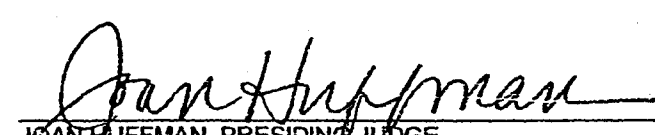
CAUSE NUMBER: 863323

I understand that under the laws of this State, the Court shall determine the terms and conditions of Community Supervision, and may alter or modify said conditions during the period of Community Supervision. I further understand that failure to abide by these Conditions of Community Supervision may result in the revocation of Community Supervision or an adjudication of guilt.

Signed this 13TH day of SEPTEMBER A.D. 2001

Community Supervision expires the 12TH day of SEPTEMBER A.D. 2004


JANICE DENISE SHELVIN, DEFENDANT

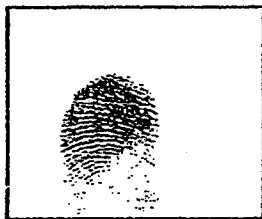

JOAN HUFFMAN, PRESIDING JUDGE


GLENN LOETHEN, COURT LIAISON OFFICER

SEPTEMBER 13, 2001
DATE

SPN: 01500181

PLEA: GUILTY



Defendant's Right Thumbprint

V3536 P0005

V3455 P0184

CAUSE NO. 863323

THE STATE OF TEXAS

IN THE 183RD DISTRICT COURT

VS.

OF

JANICE DENISE SHELVIN

HARRIS COUNTY, TEXAS

1ST ORDER MODIFYING CONDITIONS OF COMMUNITY SUPERVISION

On this the 5TH day of December 2001, the Court finds that the Order placing the Defendant on community supervision in Cause No. 863323, should be, and the same is hereby amended by changing condition(s) of community supervision in said Order as follows, to wit;

ADD:

- (00) Write a letter of apology to the complainant, PAUL BETTENCOURT and submit it to your Community Supervision Officer in a stamped unsealed envelope for review by the Court and mailing to the complainant by DECEMBER 13, 2001. The letter of apology will be submitted to the Court for review through your Community Supervision Officer prior to HCCS&CD mailing the letter to the complainant.

All other terms and conditions of community supervision shall remain in full force and effect as heretofore ordered.

Signed this 5TH day of December 2001.

Joan Huffman
JOAN HUFFMAN

I acknowledge receipt of a copy of the conditions of my supervision as modified and further acknowledge that a Harris County Community Supervision Officer has explained said modification.

Dated: DEC - 5 2001

Janice Shelvin
JANICE DENISE SHELVIN, DEFENDANT

Patricia Bennett
COMMUNITY SUPERVISION OFFICER

RIGHT THUMBPRINT

1ST ORDER MODIFYING CONDITIONS OF COMMUNITY SUPERVISION
Revised 10/11/01
JANICE DENISE SHELVIN
CAUSE No. 863323

- 1 -

TX_00002346
JA_005105

TX_00002346

USA_00019987



Cause No. 086332301010

THE STATE OF TEXAS

v.

JANICE DENI SHELVIN, DEFENDANT

183 District Court

Harris County, Texas

ORDER AFFECTING COMMUNITY SUPERVISION

After considering the community supervision officer's recommendation and other evidence, the presiding judge FINDS that the Defendant ☒ has ☐ has not satisfactorily fulfilled the conditions of supervision imposed by the court under The Texas Code of Criminal Procedure and / or Chapter 481 of the Texas Health and Safety Code:

MOTION DENIED

- ☐ The defendant has not satisfactorily fulfilled the conditions of supervision imposed by the court for the full term of the supervision period to which he / she was sentenced.
- ☐ Accordingly, the Court ORDERS defendant's motion to modify community supervision denied.

MOTION GRANTED

Full Term

- ☒ The defendant has satisfactorily fulfilled the conditions of supervision imposed by the court for the full term of the supervision period to which he / she was sentenced.

Early Termination

- ☐ The defendant has satisfactorily fulfilled the conditions of supervision imposed by the court for two (2) years or for more than one-third (1/3) of the time to which defendant was sentenced to community supervision.

Deferred Adjudication

- ☐ The best interests of the defendant and society will be served by the early termination of defendant's supervision period. The Court has not proceeded to an adjudication of guilt during the period of supervision.

Conditional Discharge

☐ ☐

Other Comments

☐ ☐

Accordingly, the Court ORDERS defendant's community supervision terminated.

The Court further ORDERS, ADJUDGES AND DECREES that

- ☒ The defendant is discharged according to law.

Date signed: 9/20/04

Joan Huffman

Judge Presiding, 183 District Court
Harris County, Texas

TX_00002347
JA_005106

V4831 P0296

TX_00002347

USA_00019988

CAUSE NO. 863323

THE STATE OF TEXAS

IN THE 183RD DISTRICT COURT

VS.

OF

JANICE DENISE SHELVIN

HARRIS COUNTY, TEXAS

1ST ORDER MODIFYING CONDITIONS OF COMMUNITY SUPERVISION

On this the 5TH day of December 2001, the Court finds that the Order placing the Defendant on community supervision in Cause No. 863323, should be, and the same is hereby amended by changing condition(s) of community supervision in said Order as follows, to wit;

ADD:

- (00) Write a letter of apology to the complainant, PAUL BETTENCOURT and submit it to your Community Supervision Officer in a stamped unsealed envelope for review by the Court and mailing to the complainant by DECEMBER 13, 2001. The letter of apology will be submitted to the Court for review through your Community Supervision Officer prior to HCCS&CD mailing the letter to the complainant.

All other terms and conditions of community supervision shall remain in full force and effect as heretofore ordered.

Signed this 5TH day of December 2001.

Joan Huffman
JOAN HUFFMAN

I acknowledge receipt of a copy of the conditions of my supervision as modified and further acknowledge that a Harris County Community Supervision Officer has explained said modification.

Dated: DEC - 5 2001

Janice Shelvin
JANICE DENISE SHELVIN, DEFENDANT

Patricia Bennett
COMMUNITY SUPERVISION OFFICER

RIGHT THUMBPRINT

1ST ORDER MODIFYING CONDITIONS OF COMMUNITY SUPERVISION

Revised 10/11/01

JANICE DENISE SHELVIN

CAUSE No. 863323

- 1 -

TX_00002348

JA_005107

TX_00002348

USA_00019989



Cause No. 086332301010

THE STATE OF TEXAS

v.

JANICE DENI SHELVIN, DEFENDANT

183 District Court

Harris County, Texas

ORDER AFFECTING COMMUNITY SUPERVISION

After considering the community supervision officer's recommendation and other evidence, the presiding judge FINDS that the Defendant ☒ has ☐ has not satisfactorily fulfilled the conditions of supervision imposed by the court under The Texas Code of Criminal Procedure and / or Chapter 481 of the Texas Health and Safety Code:

MOTION DENIED

- ☐ The defendant has not satisfactorily fulfilled the conditions of supervision imposed by the court for the full term of the supervision period to which he / she was sentenced.
- ☐ Accordingly, the Court ORDERS defendant's motion to modify community supervision denied.

MOTION GRANTED

Full Term

- ☒ The defendant has satisfactorily fulfilled the conditions of supervision imposed by the court for the full term of the supervision period to which he / she was sentenced.

Early Termination

- ☐ The defendant has satisfactorily fulfilled the conditions of supervision imposed by the court for two (2) years or for more than one-third (1/3) of the time to which defendant was sentenced to community supervision.

Deferred Adjudication

- ☐ The best interests of the defendant and society will be served by the early termination of defendant's supervision period. The Court has not proceeded to an adjudication of guilt during the period of supervision.

Conditional Discharge

☐ ☐

Other Comments

☐ ☐

Accordingly, the Court ORDERS defendant's community supervision terminated.
The Court further ORDERS, ADJUDGES AND DECREES that

- ☒ The defendant is discharged according to law.

Date signed: 9/20/04

Judge Presiding, 183 District Court
Harris County, Texas

TX_00002349
JA_005108

V4831 P0296

TX_00002349

USA_00019990